## Edgar Filing: Smith Robert Lawrence - Form 4

Smith Rober Form 4	rt Lawrence									
March 04, 2	_									
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB AF OMB Number:	3235-0287	
Check this box Januar							rs per			
(Print or Type Responses)										
1. Name and A Smith Robe	Symbol	2. Issuer Name <b>and</b> Ticker or Trading Symbol GRAY TELEVISION INC [GTN]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
()			3. Date of Earliest Transaction (Month/Day/Year) 02/28/2019				Director 10% Owner X Officer (give title Other (specify below) below) SVP & COO			
	nendment, Date Original Ionth/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>					
Person								1 0		
(City) 1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		3. Transactio Code	4. Securi n(A) or Di (Instr. 3,	ties A	cquired d of (D)	<b>uired, Disposed of</b> 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock							69	Ι	By 401(k) Plan	
Common Stock	02/28/2019		F	9,757	D	\$ 21.91	161,065	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Smith Robert Lawrence 4370 PEACHTREE ROAD NE SUITE 400 ATLANTA, GA 30319			SVP & CC	00				
Signatures								
/s/ Dottie Boudreau by Power of Attorney		03/04/2	2019					
<u>**</u> Signature of Reporting Person		Date						
Evenlowether of Deenenees								

## **Explanation of Responses:**

\* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.